



**STATE OF CONNECTICUT  
DEPARTMENT OF CHILDREN AND FAMILIES  
PUBLIC HEARING TESTIMONY OF  
COMMISSIONER SUSAN I. HAMILTON  
SELECT COMMITTEE ON CHILDREN  
FEBRUARY 5, 2009**

**S.B. No. 750 (RAISED) AN ACT CONCERNING TRANSFERS OF SUBSIDIZED  
GUARDIANSHIP**

The Department of Children and Families has submitted **S.B. No. 750 (RAISED) AN ACT CONCERNING TRANSFERS OF SUBSIDIZED GUARDIANSHIP** to the Select Committee on Children for your favorable consideration and we would like to take this opportunity to thank you for raising this bill on our behalf.

This bill would allow transfers of subsidized guardianships in circumstances of death, or severe disability or illness of the guardian. It would allow for subsidized guardianships to continue in the case of disruption or death of the subsidized guardian.

DCF processes several of these cases each year in the Subsidy Unit in the case of death of the guardian, and this proposal would allow the subsidy to go to the new guardian without the child having to come back into DCF care. Unfortunately, the Department is seeing many subsidized guardianship cases disrupt due to death or significant illness of the guardian, usually an older grandparent. Present statutory language does not allow for the transfer of a guardianship subsidy to a new guardian. Section 17a-126 of the General Statutes requires that a subsidy only be given when the child is in DCF custody, and the caregiver is licensed by DCF. When a guardian dies, and another family member steps forward to take the child, they go to Probate Court and apply to be guardian, and have to apply to DSS for TANF assistance, which is about \$344/mo. This proposal would allow a transfer of the subsidized guardianship in circumstances of death, or severe disability or illness of the guardian. A thorough investigation by DCF would have to be conducted, that would include licensing standards for police checks and CPS checks as well as home environment.

**S.B. No. 751 (RAISED) AN ACT CONCERNING THE ISSUANCE OF EMERGENCY  
CERTIFICATES BY CERTAIN STAFF OF THE EMERGENCY MOBILE  
PSYCHIATRIC SERVICES PROGRAM**

The Department of Children and Families has also submitted **S.B. No. 751 (RAISED) AN ACT CONCERNING THE ISSUANCE OF EMERGENCY CERTIFICATES BY CERTAIN STAFF OF THE EMERGENCY MOBILE PSYCHIATRIC SERVICES PROGRAM.**

This bill would give designated professionals operating within the emergency mobile psychiatric service (EMPS) program authority to issue emergency certificates directing a person with psychiatric disabilities to be taken to a hospital for an evaluation.

The Department is aware of concerns and questions raised regarding this proposal. We do not intend to further pursue this legislation this session, but instead, will work with the provider and advocacy community on necessary enhancements to the EMPS program, including a further examination of pursuing legislation of this nature.

<b>H.B. No. 6234 (RAISED) AN ACT CONCERNING FOSTER AND ADOPTIVE PARENTS AS MANDATED REPORTERS OF CHILD ABUSE AND NEGLECT</b>
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A third DCF proposal is **H.B. No. 6234 (RAISED) AN ACT CONCERNING FOSTER AND ADOPTIVE PARENTS AS MANDATED REPORTERS OF CHILD ABUSE AND NEGLECT.**

This bill adds licensed foster and adoptive parents to the list of individuals and professionals mandated to report child abuse and neglect. As you know, the 3,300 licensed foster and adoptive parents are responsible for full-time care of children and have a unique perspective on the needs of the children in their homes.

As you also know, mandated reporters are people in professions or occupations that have contact with children, or whose primary focus is children (e.g. school professionals, law enforcement, and medical professionals). Mandated reporters are required to report or cause a report to be made when, in the ordinary course of their employment or profession, they have reasonable cause to suspect or believe that a child under the age of 18 has been abused, neglected or is placed in imminent risk of serious harm.

This proposal was requested by the Connecticut Association of Foster and Adoptive Parents, a non-profit organization dedicated to advocating for, and supporting, foster and adoptive families. We join them in support of this measure.

<b>H.B. No. 6235 (RAISED) AN ACT CONCERNING THE USE OF CRIMINAL HISTORY RECORD INFORMATION FOR EMERGENCY PLACEMENT OF CHILDREN</b>
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DCF has also submitted **H.B. No. 6235 (RAISED) AN ACT CONCERNING THE USE OF CRIMINAL HISTORY RECORD INFORMATION FOR EMERGENCY PLACEMENT OF CHILDREN.**

This bill codifies current practice by providing DCF with access to the federal criminal database known as the Interstate Identification Index (III or Triple I) for use in circumstances involving the emergency placement of children. Under the Adam Walsh Act passed by Congress in 2007, the Department and other child protection agencies have been granted temporary access to the Triple I by the FBI. However, to make this access permanent, federal law requires that DCF

have state statutory authority as well. We have attached to our testimony a string of e-mails between DCF Legal Division staff and the FBI on our need for a statutory provision.

Under the Triple I, the FBI maintains a database of persons arrested throughout the United States for felonies or serious misdemeanors. The index includes identification data (name, birth date, race, sex, etc.), and FBI and state identification numbers (SIDs) from each state that has information about an individual. Permanent access to this database means that the Department can immediately run a criminal background check to clear relatives and others for emergency placement of children. This will allow us to avoid placing many children in foster care with strangers and, thus, minimize the trauma of being removed from their parents. We urge you to favorably consider this bill which will allow us to retain this valuable resource at virtually no cost to the state.

The language of this bill is drafted pursuant to model language provided by the FBI. Attached is communication from the FBI that further outlines the necessity of passage of this measure.

<p><b>H.B. No. 6236 (RAISED) AN ACT CONCERNING THE ELIMINATION OF CERTAIN REPORTS AND ADVISORY COMMITTEES RELATED TO THE DEPARTMENT OF CHILDREN AND FAMILIES</b></p>
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The final DCF proposal on your agenda today is **H.B. No. 6236 (RAISED) AN ACT CONCERNING THE ELIMINATION OF CERTAIN REPORTS AND ADVISORY COMMITTEES RELATED TO THE DEPARTMENT OF CHILDREN AND FAMILIES**

This bill incorporates recommendations that were contained in last year's of DCF Monitoring and Evaluations conducted by the Legislative Program Review and Investigations Committee.

This bill includes the elimination of obsolete reporting statutes and the following mandated reports:

- annual self-evaluations by community collaboratives participating in Connecticut KidCare, the state's child behavioral health program (§ 17a-22c);
- CJTS advisory group ongoing reviews and DCF annual reports on their findings and recommendations (§ 17a-6b);
- annual child care facility reports from DCF- or Department of Developmental Services licensees (§ 17a-145);
- annual DCF reports containing delinquency statistics and new facility plans (§ 17a-6c);
- annual performance reports on DCF's Unified School District #2 (§ 17a-37);
- quarterly reports from hospitals to DCF concerning psychiatric services provided to children (§ 17a-21); and
- DCF's monthly reports to the Public Health and Human Services committees concerning hospitalized children receiving subacute psychiatric care due to a lack of community-based services (§17a-91a).

The bill also eliminates an advisory committee that studies and makes annual reports to DCF on programs to promote adoption of minority and hard-to-place foster children (§17a-116b), a

committee that reviews safety and security issues at CJTS that affect Middletown (§ 17a-6b) and an evaluation of the costs and benefits of programs serving juvenile offenders (§ 46b-121m).

The Department believes that the development of our new strategic plan, and accompanying periodic reports, will provide updated data and information on all aspects of the Department's services, and provide a better vehicle for information sharing.

<p><b>Proposed H.B. No. 5145 AN ACT CONCERNING EDUCATION OF STUDENTS ON THE PREVENTION OF SHAKEN BABY SYNDROME</b></p>
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The Department of Children and Families offers the following comments regarding **Proposed H.B. No. 5145 AN ACT CONCERNING EDUCATION OF STUDENTS ON THE PREVENTION OF SHAKEN BABY SYNDROME**. While we're not taking a formal position on this bill, we wanted to provide some background information regarding some current collaborations regarding Shaken Baby Syndrome in Connecticut.

Although the incidence of shaken baby syndrome may be a statistically rare occurrence, the effects can be devastating. One shaken baby in three dies as a result of the abuse.<sup>1</sup> Blindness or retinal hemorrhaging is seen in at least 80% of the cases.<sup>2</sup> Other consequences include hearing loss, cerebral palsy, developmental delays, seizures and paralysis.<sup>3</sup> In 2004 Prevent Child Abuse Connecticut compiled expenditures related to three of the 5 known victims of shaken baby syndrome in Connecticut. These cost estimates included medical, investigation, family treatment, correctional expenses for the offender and the total exceeded \$1,600,000.<sup>4</sup>

In the past, shaken baby prevention initiatives have focused on directives to parents to not shake their baby. If the crying persists, caregivers are advised to walk away and allow the baby to cry until she/he cries her/him self to sleep.

The Child Poverty and Prevention Council cited the "CT Shaken Baby Prevention Initiative: Empowering Parents" as one of six examples of successful interagency collaborations to meet the State's child poverty and prevention goals. This statewide Collaborative led by the Department of Children and Families, includes the Department of Public Health, the Department of Correction, the Department of Mental Health and Addiction Services, and the Office of the Child Advocate. The Collaborative developed a pilot in which two different interventions were taught to parents by parent educators. All partners have supported this initiative with dollars and staff. Additional agencies have expressed interest in joining the initiative after the evaluation report is submitted. The CT Clearinghouse provides logistical support.

Two interventions were chosen: 1) The Happiest Baby on the Block (HBB) (a behavioral intervention) teaches parents strategies for soothing crying babies and 2) The Period of Purple

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<sup>1</sup> Wyszynski, M.E., Clinical Excellence for Nurse Practitioners, September 1999, "Shaken Baby Syndrome: Identification, Intervention and Prevention.

<sup>2</sup> Moran, Kieran T. National Australian Conference on Shaken Baby Syndrome

<sup>3</sup> Palmer, Shaken Baby Syndrome, [www.thearc.org/faqs/Shaken.html](http://www.thearc.org/faqs/Shaken.html)

<sup>4</sup> Santangelo, Susanne, The Price We Pay, Presentation

Crying (a cognitive intervention) normalizes crying by putting it in the context of normal infant development and parent educators teach parents to never shake a baby. A total of 43 Parent Educators have been trained so that they may train parents ~ 35 on the Happiest Baby on the Block and 19 on Purple Crying.

It is expected that 320 parents (in a range of settings, including WIC sites; maternity homes; community health centers; prenatal programs at York Correctional Institution; substance abuse residential programs;) will be trained to use the Happiest Baby on the Block and 250 parents on Purple Crying.

An independent evaluation of this effort is being conducted by Dr. Linda Frisman, Director of Research at the Department of Mental Health and Addiction Services. A report on the pilot is expected in June, 2009.

## **BACKGROUND INFORMATION - HB 6325**

**From:** Scott Phillips [mailto:sphillip@leo.gov]  
**Sent:** Thursday, July 24, 2008 7:11 AM  
**Subject:** RE: RE: Purpose Code X Connecticut

I am Scott Phillips with the FBI National Crime Prevention and Privacy Compact Council Staff in Clarksburg, WV. Based on the information [provided], Connecticut's request to extend its temporary use of Purpose Code "X" under the Compact Council's Fingerprint Submission Requirements rule is approved until May 2009 or until the pending legislation is passed by the Connecticut legislature. If it is not passed in the next session, Connecticut will have to resubmit its request for an extension of the temporary approval. Please let me know if you have any further questions.

Thanks,

Scott Phillips  
Analyst  
FBI CJIS Division